

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:
TARA ELANTHIA JOHNSON
Debtor(s)

Case No. 09-21878

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 06/16/2009.
- 2) The plan was confirmed on 08/06/2009.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 08/06/2009, 08/27/2009, 02/23/2012.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 12/12/2011, 08/15/2012.
- 5) The case was dismissed on 09/27/2012.
- 6) Number of months from filing to last payment: 35.
- 7) Number of months case was pending: 52.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$27,320.00.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$17,351.53
Less amount refunded to debtor	\$7.79

NET RECEIPTS:

\$17,343.74

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$600.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,016.21
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$1,616.21

Attorney fees paid and disclosed by debtor: \$2,900.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
AAA CHECKMATE	Unsecured	1,900.00	1,911.85	1,911.85	282.45	0.00
ALLSTATE INSURANCE	Unsecured	200.00	NA	NA	0.00	0.00
AT&T	Unsecured	300.00	NA	NA	0.00	0.00
AT&T CREDIT MANAGEMENT	Unsecured	70.00	NA	NA	0.00	0.00
BROTHER LOAN & FINANCE CO	Unsecured	1,900.00	1,975.70	1,975.70	291.87	0.00
CHRIST HOSPITAL	Unsecured	4,900.00	NA	NA	0.00	0.00
CITY OF CHICAGO EMS	Unsecured	800.00	NA	NA	0.00	0.00
CITY OF CHICAGO WATER DEPT	Secured	400.00	0.00	400.00	400.00	11.17
COMMONWEALTH EDISON	Unsecured	350.00	314.93	314.93	46.53	0.00
GENESIS CLINICAL LABORATORY	Unsecured	150.00	NA	NA	0.00	0.00
GMAC MORTGAGE	Secured	NA	19,451.62	2,903.74	2,903.74	0.00
GMAC MORTGAGE	Secured	84,200.00	67,556.22	NA	0.00	0.00
ILLINOIS COLLECTION SE	Unsecured	350.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SE	Unsecured	350.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SE	Unsecured	300.00	NA	NA	0.00	0.00
ILLINOIS COLLECTION SE	Unsecured	300.00	NA	NA	0.00	0.00
ILLINOIS DEPT OF REVENUE	Priority	400.00	1,374.86	1,374.86	1,374.86	0.00
ILLINOIS DEPT OF REVENUE	Unsecured	NA	189.33	189.33	20.59	0.00
INTERNAL REVENUE SERVICE	Priority	2,800.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	5,500.00	9,789.32	9,789.32	9,789.32	0.00
INTERNAL REVENUE SERVICE	Priority	2,100.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA	430.96	430.96	63.66	0.00
MACNEAL HEALTH NETWORK	Unsecured	100.00	NA	NA	0.00	0.00
MICHAEL REESE HOSPITAL	Unsecured	200.00	NA	NA	0.00	0.00
NATHAN LONG DDS	Unsecured	350.00	NA	NA	0.00	0.00
NORWEST CAPITAL INVESTMENT	Unsecured	1,900.00	1,308.70	1,308.70	193.34	0.00
OAKLAW RADIOLOGY	Unsecured	450.00	NA	NA	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	1,200.00	NA	NA	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	1,200.00	1,502.06	1,502.06	221.91	0.00
PREMIER BANK CARD	Unsecured	900.00	867.00	867.00	128.09	0.00
PREMIUM ASSET RECOVERY	Unsecured	200.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
UNIVERSITY OF CHICAGO HOSPITAL	Unsecured	700.00	NA	NA	0.00	0.00
UNIVERSITY OF IL MEDICAL CTR	Unsecured	60.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$2,903.74	\$2,903.74	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$400.00	\$400.00	\$11.17
TOTAL SECURED:	\$3,303.74	\$3,303.74	\$11.17
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$11,164.18	\$11,164.18	\$0.00
TOTAL PRIORITY:	\$11,164.18	\$11,164.18	\$0.00
GENERAL UNSECURED PAYMENTS:	\$8,500.53	\$1,248.44	\$0.00

Disbursements:

Expenses of Administration \$1,616.21
Disbursements to Creditors \$15,727.53

TOTAL DISBURSEMENTS : **\$17,343.74**

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 10/02/2013

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.